

AMENDMENT ONE
to the
Invitation to Bid
Pharmacy Administrative Services
ITB# 09-X-2193471

The above referenced Invitation to Bid, dated May 2008, is amended as outlined below. This amendment must be signed and returned with the bid response, which must be received no later than 5:00 p.m. Central Standard Time on June 9, 2008, or the bid may not be considered. The bid response is to be opened on June 10, 2008, at 9:00 a.m. Central Standard Time at the office of the Department of Finance, Division of Purchasing, RSA Union Building, 100 North Union Street, Suite 192, Montgomery, Alabama.

On page 3, Section 1.20.0, item 3, which currently reads:

"Submit the original bid and eight hard copies and one electronic copy of the bid on CD in Word 6.0 or higher format"

is amended to read:

"Submit the original bid, six hard copies and one electronic copy of the bid on CD in Word 6.0 or higher format"

On page 4, Section 1.20.0, item 10, which currently reads:

"Submit resume/s for project manager, consulting physician, help desk supervisor, recipient liaison and account pharmacist"

is amended to read:

"Submit resumes for project manager, consulting physician, and account pharmacist"

On page 32, Section 3.60.0, which currently reads:

"3.60.0 Operational Requirements"

is amended to read:

"3.60.1 Operational Requirements"

On page 32, Section 3.60.1, which currently reads:

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Contractor shall have installed and provide for maintenance of a minimum of a dedicated 512 kbps communication line from Medicaid's fiscal agent to the Contractor's facility. Contractor shall be responsible for all cabling within their facilities. In addition, Contractor shall be financially responsible for a CSU/DSU and IP router that will be required at each end of the line. Contractor shall be required to have workstations and adapter cards to support TCP/IP protocol. Contractor shall have IE 6.0 and TCP/IP stack for each work-station accessing the Medicaid fiscal agent network.

is amended to read:

Contractor shall have installed and provide for maintenance of a minimum of a dedicated T1 (1.54 Mbps) communication line from Medicaid's fiscal agent to the Contractor's facility. Contractor shall be responsible for all cabling within their facilities. In addition, Contractor shall be financially responsible for a CSU/DSU and IP router that will be required at each end of the line. Contractor will be financially responsible for all cabling, setup, purchase and maintenance charges for all equipment required at the Medicaid fiscal agent's facility. The circuit/router configuration must include QOS (Quality of Service) to prioritize pharmacy prior authorization traffic above all other traffic and must encrypt all traffic to a minimum of 3DES. Contractor shall be required to have workstations and adapter cards to support TCP/IP protocol. Contractor shall have IE 6.0 and TCP/IP stack for each work-station accessing the Medicaid fiscal agent network.

On page 74, Attachment A, which currently provides the ITB pricing schedule in the ITB:

is amended to include an updated Pricing schedule. The pricing schedule is attached to this document and has been included in the bidder's library.

Signature acknowledges receipt of this amendment and its incorporation into the Invitation to Bid:

Firm: _____

By: _____

Date: _____

Bid Pricing Schedule

Pricing Schedule A Bid Components

Bid Component (includes implementation and maintenance)	Price
Prospective DUR Monitoring Program	\$
Maximum Allowable Cost Pricing	\$
TFQ Requirement	\$
Prior Authorization /Override Requirements	\$
Administrative Requirements	\$
Operational Requirements	\$
Retrospective DUR	\$
Academic Detailing	\$
Drug Interface System	\$
Help Desk	\$
Staff Pharmacist	\$
Staff Certified Pharmacy Technician	\$
Total	\$

Pricing Schedule B Extra Contractual Services

Contract Item	Rate	Units*	Price (rate x units)
Help Desk Clerk Salary and Benefits	\$ Monthly	60	\$
Help Desk Phone Line	\$ Monthly	60	\$
FAX Line	\$ Monthly	60	\$
Help Desk Furniture and Equipment	\$ Monthly	60	\$
Statistician	\$ Hourly	200	\$
Programmer/System Analyst	\$ Hourly	200	
Total			\$

*for evaluation purposes only

Pricing Schedule C Evaluated Price

Contract Item	Price
Firm and Fixed Annual Base Price (from Schedule A)	\$
Extra Contractual Services Total (from Schedule B)	\$
Total Evaluated Price (Enter on ITB Form)	\$

Signature _____ Date _____